

Mental Health and Well-being After a Stroke

The Importance of Addressing Mental Health Concerns in Stroke Recovery

Laurie Thompson OTD, OTR/L

Quick Facts

- Depression and anxiety are common after stroke, both for stroke survivors and caregivers
- Psychological care for mental health concerns are often underrecognized and undertreated in stroke recovery and need to be prioritized as early as possible
- Knowing the signs and symptoms of mental health issues post-stroke and speaking with a healthcare professional about your concerns are important to get the care you need
- There are multiple treatment approaches for mental health concerns

If you or a loved one have experienced a stroke, you already know it can be a life changing event. It is normal to grieve after a stroke, and this process often takes time and varies person to person. While physical care is often prioritized, psychological care for mental health concerns are often underrecognized and undertreated in stroke recovery. Mental health conditions such as depression and anxiety are common after stroke, both for the stroke survivor and their care provider(s). For survivors, these conditions occur in approximately 30% of individuals post-stroke (Terrill, 2023). Issues with mental health may occur early on (within 3 months

post-stroke) or later (6 months post-stroke or later), and overall are associated with increased risk for disability, having another stroke, and mortality, as well as decreased quality of life and participation in rehabilitation (Terrill, 2023; Zhang et al., 2020). The earlier these concerns can be addressed, the better chance for recovery and improved long-term outcomes (Terrill, 2023)

Mental Health Issues After Stroke

Mental health issues occur after a stroke most simply because a stroke impacts the biochemistry of the brain and the brain helps to control our emotions. Some cases of early post-stroke depression may be due to the direct injury itself and symptoms may resolve on their own. However, later onset depression is more persistent and individuals tend to have poorer outcomes if not addressed early on (Terrill, 2023).

Post-stroke anxiety is commonly seen in the later stages of stroke recovery. Some individuals may be at a higher risk than others, however it is important for all survivors, their loved ones, and care providers to be aware of potential risk factors, as well as signs and symptoms.

Potential Risk Factors and Barriers to Care

- History of depression
 - Family history (e.g., stroke patients with a family history of psychiatric disorders have an increased risk for developing post-stroke depression (Zhang et al., 2020))
 - Genetics
 - Additional factors that *may or may not* impact your risk (Zhang et al., 2020)
 - Prior and ongoing medical conditions besides stroke
 - Stroke severity and functional impairments post-stroke
 - Excessive fatigue
 - Being female
 - Being < 70 years old
 - Having a lack of social and family support
 - Socioeconomic status (e.g., access to health services, health insurance coverage)
 - Educational level
 - Research shows that ethnically/racially, culturally, and linguistically diverse patients are especially underserved in mental health treatment (Terrill, 2023)
-

It is critical to reemphasize the importance of early detection of mental health issues, as well as prompt and proper treatment to ensure the best possible outcomes. If you are experiencing any of the signs or symptoms listed below for longer than two weeks and have thoughts of self-harm,

reach out to a trusted healthcare provider as soon as possible to get a proper diagnosis before exploring treatment options.

Signs and Symptoms of Mental Health Issues (American Stroke Association)

- Persistent sad, anxious or “empty” mood
 - Restlessness and irritability
 - Feelings of hopelessness, pessimism, guilt, worthlessness or helplessness
 - Loss of interest or pleasure in hobbies and activities, including sex
 - Decreased energy and fatigue, and feeling “slowed down”
 - Difficulty concentrating, remembering and making decisions
 - Insomnia, early-morning awakening or oversleeping
 - Appetite and/or weight changes
 - Thoughts of death or suicide, or suicide attempts
 - Feelings of worry, nervousness or unease.
-

Treatment Approaches

Pharmacological approaches, such as antidepressant or anti-anxiety medications, are common treatments, however there may be risks or side effects depending on your current medical conditions and medications. You should always speak with your healthcare provider before making any changes to your medications.

Psychotherapy is another approach and may include talk therapy with a trained therapist, positive psychology focusing on mental wellness, mindfulness-based activities focusing on being in the present moment (e.g., breathwork, meditation, yoga), and cognitive-behavioral therapy (Flint Rehab, 2019). At NeuroAxis Rehab, we have a wonderful mental health counselor on our staff who would be more than happy to discuss options with you. We also have a patient advocate who can help explore additional referral options that fit your needs.

Additional approaches may include arts-based therapies such as music therapy, art therapy, dance movement therapy, drama therapy, and expressive writing. Depending on your preferences, you may benefit from a combination of approaches. In general the goal of these therapies is to encourage self-expression and creativity in a safe environment (Lo et al., 2018). Additional benefits of these activities may include providing opportunities to improve the use of your affected limb (e.g., playing the piano to improve fine motor skills), communication skills (e.g., singing), confidence and self-esteem, social engagement through group-based activities, and spiritual connection (Lo et al., 2018).

Physical exercise has also been shown to have a positive impact on depressive symptoms in various stages of stroke recovery and may help complement other treatment options (Eng & Reime, 2014). Higher intensity exercise, which is aligned with general adult exercise guidelines of 150 minutes per week (approximately 30 mins 3-5 days per week) by the American College of Sports Medicine, has been demonstrated to have more significant effects on symptoms (Eng & Reime, 2014). Specifics may vary individual to individual and we recommend speaking with your healthcare provider before starting a physical exercise program.

A combination of the approaches above may be more effective than one treatment alone. It also may take some time to experiment with what works best for you. Be sure to be patient and kind with yourself throughout this process.

Caregiver Mental Health

Caregivers, or care partners, can also experience mental health concerns after their loved one has experienced a stroke. Being a caregiver can be a rewarding experience but it can also be stressful. It is normal to feel overwhelmed and uncertain, especially if you have not previously been in a caregiving role. Stroke survivors commonly experience emotional and behavioral changes after a stroke, and it may be challenging as a caregiver to adjust. It is important to not take these changes too personally in order to protect your own mental health. Taking care of your own needs is just as important as taking care of your loved one's. When possible, seek support from friends, family, your community, and caregiver assistance to help you in this new role.

To reduce feelings of stress, it can be helpful to learn more about your loved one's stroke. Don't hesitate to ask your healthcare providers questions regarding the type of stroke that occurred and its common effects, rehabilitation and treatment options, and about [signs and symptoms](#) to be aware in case of another stroke.

It is important that you take time to care for yourself, both physically through diet and exercise, as well as mentally through relaxation, partaking in preferred hobbies, and spending time with family and friends. Consider seeking a mental health professional if you find yourself experiencing any of the signs and symptoms listed above.

Additional Suggestions for Coping for Survivors and Caregivers

- Allow yourself to grieve, but also be kind and compassionate. Accepting where you are now is not the same as giving up

- Look for social support in family and friends you trust, community groups such as spiritual organizations, support groups, and healthcare providers
 - Find ways to connect with others and do activities that bring you joy
 - Create meaningful goals and focus on the things that are going well in your life
-

Resources

- If you or someone you know is struggling or in crisis, call or text **988** or chat 988lifeline.org. You can also reach the Crisis Text Line by texting MHA to 741741.
- Support groups
 - To find support groups in your area for survivors and caregivers
 - 1-888-4-STROKE or visit <https://www.stroke.org/en/stroke-support-group-finder>
 - NeuroAxis Rehab Support Group: <https://www.neuroaxisrehab.com/support-group>
- [Post-stroke depression from the American Stroke Association](#)
- [Caregiver Guide to Stroke](#)
- [Taking care of your mental wellbeing as a caregiver](#)

References

American Stroke Association. (n.d.). *Emotional and Behavioral Effects of Stroke*. Stroke.org. <https://www.stroke.org/en/about-stroke/effects-of-stroke/emotional-effects>

Eng, J. J., & Reime, B. (2014). Exercise for depressive symptoms in stroke patients: a systematic review and meta-analysis. *Clinical Rehabilitation*, 28(8), 731–739. <https://doi.org/10.1177/0269215514523631>

Flint Rehab. (2019, December 23). Psychological Care After Stroke: Why Holistic Recovery Works. Flint Rehab. <https://www.flintrehab.com/psychological-care-after-stroke/>

Lo, T. L. T., Lee, J. L. C., & Ho, R. T. H. (2018). Creative Arts-Based Therapies for Stroke Survivors: A Qualitative Systematic Review. *Frontiers in Psychology*, 9. <https://doi.org/10.3389/fpsyg.2018.01646>

Terrill, A. L. (2023). Mental Health Issues Poststroke: Underrecognized and Undertreated. *Stroke*, 54(6), 1528–1530. <https://doi.org/10.1161/strokeaha.123.042585>

Zhang, S., Xu, M., Liu, Z.-J., Feng, J., & Ma, Y. (2020). Neuropsychiatric issues after stroke: Clinical significance and therapeutic implications. *World Journal of Psychiatry*, 10(6), 125–138.
<https://doi.org/10.5498/wjp.v10.i6.125>